PTO/SB/89 (01-06)
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OR							
Practitioner(s) named below (if more than ten patent practitioners are to be named, then a customer number must be used):							
	Name		Registration Name		Name		Registration Number
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	/-\ / -\	Is a supposed the understand hef	m the Linded	235	ademark Office	(USPTO) in	connection with
as attorney(s) or agent(s) to represent the undersigned before the United States Patent and Trademark Office (USPTO) in connection with any and all patent applications assigned my to the undersigned according to the USPTO assignment records or assignment documents attached to this form in accordance with 37 CFR 3.73(b).							
Please change the correspondence address for the application identified in the attached statement under 37 CFR 3.73(b) to:							
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Assignee Name and Address:							
Symantec Operating Corporation							
20330 Stevens Creek Boulevard							
Cupertino, CA 95014							
A copy of this form, together with a statement under 37 CFR 3.73(b) (Form PTO/SB196 or equivalent) is required to be filled in each application in which this form is used. The extrement under 37 CFR 3.73(b) may be completed by one of the practitioners appointed in this form if the appointed practitioner is authorized to act on behalf of the assignee, and must identify the application in which this Power of Attorney is to be filled.							
SIGNATURE of Assignee of Record The individual whose signature and title is supplied below is authorized to act on behalf of the assignee							
Signature	Vere	tota Hilbarria			Date ()	13/07	
Name	المراجعة	n McKonzie			Telephor	18 408-	17-1395
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